

MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET

Kathy 1/205

SERIAL NO. 10761372  
APPLICANT(S)

FILING DATE

AS FILED	ADMITTED		ADMITTED		CLAIMS
	IND	DEP	IND	DEP	
1	1		1		
2		1			
3	1		1		
4				1	
5			1	4	
6			1	4	
7			1	8	
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TOTAL IND.	7		2		
TOTAL DEP.	9		18		
TOTAL CLAMS	11		20		

CLAIMS	IND	DEP	IND	DEP	IND	DEP
51	1					
52		1				
53			1			
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TOTAL IND.	2					
TOTAL DEP.	18					
TOTAL CLAMS	20					

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